

RECEIVED

BEFORE COPYING FORM, ATTACH SITE IDENTIFICATION LABEL OR ENTER:

SITE NAME:

NIEDT ~~ENTERPRISES~~ REALTY

EPA ID NO:

MOD 006 275 036



JUL 08 1998

U.S. ENVIRONMENTAL PROTECTION AGENCY

HAZARDOUS WASTE PROGRAM 1997 Hazardous Waste Report

MISSOURI DEPARTMENT OF

NATURAL RESOURCES

FORM IC

IDENTIFICATION AND CERTIFICATION

Instructions: Please see the detailed instructions beginning on page 7 of the instructions and forms booklet before completing this form. In addition, the page number for instructions specific to each section is provided below.

Sec. I Site name and location address. Check the box ☐ in items A, B, C, E, F, G, and H if same as label; if different, enter corrections. If label is absent, enter information. Instructions page 7.

A. EPA ID No.

Same as label ☐ or →

MOD 006 275 036

B. County

Same as label ☐ or →

ST. LOUIS CITY

C. Site/company name

Same as label ☐ or →

NIEDT

D. Has the site name associated with this EPA ID changed since 1995?

☒ 1 Yes☐ 2 No

E. Street name and number. If not applicable, enter industrial park, building name, or other physical location description.

Same as label ☐ or →

1 STEELCOTE SQUARE

F. City, town, village

Same as label ☐ or →

ST. LOUIS

G. State

Same as label ☐ or →

MO

H. Zip Code

Same as label ☐ or →

63103 -

Sec. II Mailing address of site. Instructions page 7.

A. Is the mailing address the same as the location address?

☒ 1 Yes (SKIP TO SEC. III)☐ 2 No (CONTINUE TO BOX B)

B. Number and street name of mailing address

C. City, town, village

D. State

E. Zip Code

Sec. III Name, title, and telephone number of the person who should be contacted if questions arise regarding this report. Instructions page 7.

A. Last Name

First name

M.I.

MEIER

GAVIN

T.

B. Title

AGENT

C. Telephone Number

394-5911-4171

Extension

Sec. IV

"I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted to the best of my knowledge and belief, true, accurate and complete. I am aware that there are significant penalties under Section 3008 of the Resource Conservation and Recovery Act for submitting false information, including the possibility of fine and imprisonment for knowing violations." Instructions page 8.

A. Last Name

First name

M.I.

MEIER

GAVIN

T.

B. Title

AGENT FOR GENERATOR

C. Signature

D. Date of signature

07 07 98
Month Day Year

data entered
BY EB Tricor
ON 8/4/98

QC'd 3/31/99
ABritt
TRICOR

Sec. V

Generator status. Instructions begin on page 8.

A. 1997 RCRA generator status

(CHECK ONE BOX BELOW)

- ☒ 1 LQG
☐ 2 SQG
☐ 3 CESQG
☐ 4 Non-generator (CONTINUE TO BOX B)

SKIP TO SEC. VI

B. Reason for not generating

(CHECK ALL THAT APPLY)

- ☐ 1 Never generated
☐ 2 Out of business
☐ 3 Only excluded or delisted waste
☐ 4 Only non-hazardous waste
☒ 5 Periodic or occasional generator
☐ 6 Waste minimization activity
☐ 7 Other (SPECIFY IN COMMENTS BOX BELOW)

Sec. VI

On-site waste management status. Instructions page 10.

A. Storage subject to RCRA permitting requirements☐**B. Treatment, disposal, or recycling subject to RCRA permitting requirements**☐

Comments:

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SITE NAME: NIENT REALTY

EPA ID NO: MOD 006 275 036



U.S. ENVIRONMENTAL
PROTECTION AGENCY

1997 Hazardous Waste Report

FORM
GM

WASTE GENERATION
AND MANAGEMENT

Instructions: Please see the detailed instructions beginning on page 11 of the instructions and forms booklet before completing this form. In addition, the page number for instructions specific to each box is provided in parentheses.

Sec. I A. Waste description (page 12) IGNITABLE, SPENT SOLVENT & PAINT FROM CLEANING EQUIPMENT AND OFF SPEC. PAINT IN PAINT SHOP. MIXTURE OF XYLENE, TOLUENE WITH SOME PAINT WHICH MAY HAVE TRACE AMOUNT OF LEAD.

B. EPA hazardous waste code (page 12) D001 F003
F005 D010

C. State hazardous waste code (page 13)

D. SIC code (page 13)

2851

E. Origin code (page 13) 1
System Type M

F. Source code (page 14) A09

G. Point of measurement (p. 14) 2

H. Form code (page 14) B 211

I. RCRA-radioactive mixed (page 14) 2

Sec. II A. Quantity generated in 1997 (page 15)

000000275.0

B. UOM (page 15) 5
Density 0.8
☐ 1 lbs/gal ☒ 2 sg

C. Did this site do any of the following to this waste: treat on site, dispose on site, recycle on site, or discharge to a sewer/POTW? (page 15)

☐ 1 Yes (CONTINUE TO ON-SITE PROCESS SYSTEM 1)
☒ 2 No (SKIP TO SEC. III)

ON-SITE PROCESS SYSTEM 1

On-site process system type (page 16)

M

Quantity treated, disposed, or recycled on site in 1997 (page 16)

000000000.0

ON-SITE PROCESS SYSTEM 2

On-site process system type (page 16)

M

Quantity treated, disposed, or recycled on site in 1997 (page 16)

000000000.0

Sec. III A. Was any of this waste shipped off site in 1997 for treatment, disposal, or recycling? (page 17)
☒ 1 Yes (CONTINUE TO BOX B) ☐ 2 No (FORM IS COMPLETE)

Site 1 B. EPA ID No. of facility waste was shipped to (page 17)
I40 066 918 327

C. System type shipped to (p. 17)
M 051

D. Off-site availability code (page 17)
1

E. Total quantity shipped in 1997 (page 17)
275.0

Site 2 B. EPA ID No. of facility waste was shipped to (page 17)

C. System type shipped to (p. 17)
M

D. Off-site availability code (page 17)
1

E. Total quantity shipped in 1997 (page 17)
000000000.0

Site 3 B. EPA ID No. of facility waste was shipped to (page 17)

C. System type shipped to (p. 17)
M

D. Off-site availability code (page 17)
1

E. Total quantity shipped in 1997 (page 17)
000000000.0

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Instructions: Please see the detailed instructions beginning on page 11 of the instructions and forms booklet before completing this form. In addition, the page number for instructions specific to each box is provided in parentheses.

Sec. I A. Waste description (page 12) OFF SPEC. PAINT FROM OUT DATED PRODUCTS.
Mixture of latex paint, oils and paint with petroleum
BASED SOLVENT ~~WASTE~~ (IGNITABLE)

B. EPA hazardous waste code
(page 12)

D001

C. State hazardous waste code (page 13)

D. SIC code
(page 13)

2851

E. Origin code
(page 13) System Type

1

[M] [] [] []

F. Source code
(page 14)

[A] 57

G. Point of
measurement
(p. 14)

2

H. Form code
(page 14)

[B] 209

I. RCRA-radioactive mixed
(page 14)

2

Sec. II A. Quantity generated in 1997
(page 15)

11100.0

B. UOM
(page 15)

5

Density

01.00

☐ 1 lbs/gal ☒ 2 sgC. Did this site do any of the following to this waste: treat on site,
dispose on site, recycle on site, or discharge to a sewer/POTW?
(page 15)☐ 1 Yes (CONTINUE TO ON-SITE PROCESS SYSTEM 1)
☒ 2 No (SKIP TO SEC. III)

ON-SITE PROCESS SYSTEM 1

On-site process system type
(page 16)

[M] [] [] []

Quantity treated, disposed, or recycled
on site in 1997 (page 16)

[] [] [] [] [] [] [] [] [] []

ON-SITE PROCESS SYSTEM 2

On-site process system type
(page 16)

[M] [] [] []

Quantity treated, disposed, or recycled
on site in 1997 (page 16)

[] [] [] [] [] [] [] [] [] []

Sec. III A. Was any of this waste shipped off site in 1997 for treatment, disposal, or recycling? (page 17)
☒ 1 Yes (CONTINUE TO BOX B) ☐ 2 No (FORM IS COMPLETE)

Site 1

B. EPA ID No. of facility waste was shipped to
(page 17)

FL0066918327

C. System type
shipped to (p. 17)

[M] 051

D. Off-site availability
code (page 17)

11

E. Total quantity shipped in 1997 (page 17)

11100.0

Site 2

B. EPA ID No. of facility waste was shipped to
(page 17)

[] [] [] [] [] [] [] [] [] []

C. System type
shipped to (p. 17)

[M] [] [] []

D. Off-site availability
code (page 17)

[]

E. Total quantity shipped in 1997 (page 17)

[] [] [] [] [] [] [] [] [] []

Site 3

B. EPA ID No. of facility waste was shipped to
(page 17)

[] [] [] [] [] [] [] [] [] []

C. System type
shipped to (p. 17)

[M] [] [] []

D. Off-site availability
code (page 17)

[]

E. Total quantity shipped in 1997 (page 17)

[] [] [] [] [] [] [] [] [] []

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Instructions: Please see the detailed instructions beginning on page 11 of the instructions and forms booklet before completing this form. In addition, the page number for instructions specific to each box is provided in parentheses.

Sec. I	A. Waste description (page 12) OFF SPEC. AMMONIA SOLUTION USED TO SEAL AS PRODUCT IN PRE-PREPARATION BEFORE PAINT FLOORS. PH CAUSES MATERIAL TO BE CORRODIBLE. OFF SPEC MATERIAL.				
B. EPA hazardous waste code (page 12)		C. State hazardous waste code (page 13)			
D. SIC code (page 13)		E. Origin code (page 13)	F. Source code (page 14)	G. Point of measurement (p. 14)	H. Form code (page 14)
2851		System Type [M]	[A] 57	1	[B] 105
		I. RCRA-radioactive mixed (page 14)			
		2			

Sec. II	A. Quantity generated in 1997 (page 15)		B. UOM (page 15)	C. Did this site do any of the following to this waste: treat on site, dispose on site, recycle on site, or discharge to a sewer/POTW? (page 15)	
		0000009130.0	Density 91.00	<input type="checkbox"/> 1 Yes (CONTINUE TO ON-SITE PROCESS SYSTEM 1) <input checked="" type="checkbox"/> 2 No (SKIP TO SEC. III)	
		□ 1 lbs/gal □ 2 sg			
ON-SITE PROCESS SYSTEM 1			ON-SITE PROCESS SYSTEM 2		
On-site process system type (page 16)		Quantity treated, disposed, or recycled on site in 1997 (page 16)		On-site process system type (page 16) Quantity treated, disposed, or recycled on site in 1997 (page 16)	
[M]		[]		[M] []	

Sec. III	A. Was any of this waste shipped off site in 1997 for treatment, disposal, or recycling? (page 17)				
<input checked="" type="checkbox"/> 1 Yes (CONTINUE TO BOX B) <input type="checkbox"/> 2 No (FORM IS COMPLETE)					
Site 1	B. EPA ID No. of facility waste was shipped to (page 17)	C. System type shipped to (p. 17)	D. Off-site availability code (page 17)	E. Total quantity shipped in 1997 (page 17)	
	MID 096 963 194	[M]	1	0000009130.0	
Site 2	B. EPA ID No. of facility waste was shipped to (page 17)	C. System type shipped to (p. 17)	D. Off-site availability code (page 17)	E. Total quantity shipped in 1997 (page 17)	
	[]	[M]	[]	[]	
Site 3	B. EPA ID No. of facility waste was shipped to (page 17)	C. System type shipped to (p. 17)	D. Off-site availability code (page 17)	E. Total quantity shipped in 1997 (page 17)	
	[]	[M]	[]	[]	

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Sec. I	A. Waste description (page 12) <u>ZINC PEROXIDE, OFF SPEC MATERIAL WHICH IS A</u> <u>OXIDIZER</u>				
B. EPA hazardous waste code (page 12)			C. State hazardous waste code (page 13)		
<u>0001 0003</u> []			[] [] [] [] [] [] [] [] [] [] [] [] [] [] [] [] [] [] [] []		
D. SIC code (page 13)	E. Origin code (page 13)	F. Source code (page 14)	G. Point of measurement (p. 14)	H. Form code (page 14)	I. RCRA-radioactive mixed (page 14)
<u>2851</u>	<u>1</u> System Type [M] [] [] []	<u>57</u>	<u>1</u>	<u>405</u>	<u>2</u>
Sec. II	A. Quantity generated in 1997 (page 15)		B. UOM (page 15)		C. Did this site do any of the following to this waste: treat on site, dispose on site, recycle on site, or discharge to a sewer/POTW? (page 15)
<u>000009030.0</u>		<u>5</u> Density <u>91.00</u> 1 lbs/gal <input checked="" type="checkbox"/> 2 sg		<input type="checkbox"/> 1 Yes (CONTINUE TO ON-SITE PROCESS SYSTEM 1) <input checked="" type="checkbox"/> 2 No (SKIP TO SEC. III)	
ON-SITE PROCESS SYSTEM 1			ON-SITE PROCESS SYSTEM 2		
On-site process system type (page 16)		Quantity treated, disposed, or recycled on site in 1997 (page 16)		On-site process system type (page 16)	
[M] [] [] []		[] [] [] [] [] [] [] [] [] [] [] [] [] [] [] [] [] [] [] []		[M] [] [] []	

Sec. III	A. Was any of this waste shipped off site in 1997 for treatment, disposal, or recycling? (page 17)			
<input checked="" type="checkbox"/> 1 Yes (CONTINUE TO BOX B) <input type="checkbox"/> 2 No (FORM IS COMPLETE)				
Site 1	B. EPA ID No. of facility waste was shipped to (page 17)	C. System type shipped to (p. 17)	D. Off-site availability code (page 17)	E. Total quantity shipped in 1997 (page 17)
	<u>FLD 980 559 728</u>	[M] [] [] [] [] []	<u>1</u>	<u>000000030.0</u>
Site 2	B. EPA ID No. of facility waste was shipped to (page 17)	C. System type shipped to (p. 17)	D. Off-site availability code (page 17)	E. Total quantity shipped in 1997 (page 17)
	[] [] [] [] [] [] [] [] [] [] [] [] [] [] [] [] [] [] [] []	[M] [] [] [] [] []	[]	[] [] [] [] [] [] [] [] [] [] [] [] [] [] [] [] [] [] [] []
Site 3	B. EPA ID No. of facility waste was shipped to (page 17)	C. System type shipped to (p. 17)	D. Off-site availability code (page 17)	E. Total quantity shipped in 1997 (page 17)
	[] [] [] [] [] [] [] [] [] [] [] [] [] [] [] [] [] [] [] []	[M] [] [] [] [] []	[]	[] [] [] [] [] [] [] [] [] [] [] [] [] [] [] [] [] [] [] []

Comments: